

# INSTRUCTIONS FOR PREPARING COMMUNITY ENHANCEMENT APPLICATION

(Located at <http://www.co.san-diego.ca.us/auditor/commehnc.html>)

**All data provided will be for the grant period: July 1 - June 30**

## ORGANIZATION INFORMATION (Page 1)

**Note:** Only one application per organization may be submitted. You may request funding for more than one activity, but the request should be combined as explained below.

**Taxpayer ID Number:** Enter the taxpayer ID number as it appears on IRS form W-9 for your organization.

**Organization Name:** Enter the name as it appears on IRS form W-9 for your organization.

**Street address:** Enter the Organization's primary place of business address (required).

**Mailing address** is the address to which all correspondence will be sent, or ☒ "same as above" if it is the same as the street address.

**Popular Name or "doing business as" (d.b.a.):** If funding is being requested for a program or sub-entity within the organization or if the organization is popularly known by a different name, write that name on this line. For example: Organization Name: Arts and Theatre Association, d.b.a.: Our Town Playhouse.

**District:** Choose the Supervisorial District in which your organization is physically located. Please note Supervisorial District boundaries changed effective August 30, 2001 (See County of San Diego's web site: [www.sdcountry.ca.gov/general/bos.html](http://www.sdcountry.ca.gov/general/bos.html)).

**District(s) Served:** Check all that apply.

**Primary Signatory & Title:** The printed name of the primary person who is authorized to sign the Community Enhancement grant agreement. (See also Page 3, Question 11)

**Amount Requested:** If you are requesting funding for more than one activity, give total of all activities.

**Activity(ies) to be funded:** Concisely describe the activity for which you are seeking funding. If you are requesting funding for more than one activity, list and describe each one separately with the dollar amount for each.

## ELIGIBILITY DETERMINATION (Page 2)

Complete questions 1 through 4. You must attach either pages 1 through 6 of IRS Form 990 (pages 1 and 2 of IRS form 990EZ) **or** the State of California form verifying your tax-exempt status. (Question 2)

## PROPOSAL INFORMATION (Page 2-3)

Provide clear, concise information in response to questions 5 through 9. The information will be used to evaluate your proposal. You may attach additional pages if needed to answer question 5 through 9.

## FISCAL AND SIGNATURE AUTHORITY (Page 3)

Question 10 requires the name of the individual who will be responsible for the expenditure of any funds allocated to your organization. Question 11 requires the signature, name, and title of all individuals who are authorized to sign the grant agreement with the County of San Diego for Community Enhancement Program funds for the 2005-2006 Fiscal Year.

## SUMMARY OF FINANCIAL INFORMATION (Page 4)

Financial information requested is for the total organization.

This portion of the form requests data for three (3) different periods (see column headings). The first has already passed so the data provided will be actual amounts. The second column is for current year budgeted amounts, while the third column will be your projected budget amounts for the upcoming fiscal year. If your fiscal year

covers a different time period than the County's July 1 – June 30 fiscal year, you may use data from your own fiscal years. We need financial data for the immediate past year, the current year and the upcoming year.

In the **FINANCIAL STATEMENT** portion, revenues are broken down into three (3) categories: Community Enhancement Grant (County Funding), City funding, and all other revenues. Total revenues are then entered on the form followed by total expenditures. Net income is calculated as the difference between revenues and expenditures.

The middle portion of the form requests **BALANCE SHEET** information as of the dates indicated in each column. Four accounts are requested: cash and Investments, all other assets, liabilities and equity. Assets minus liabilities must equal equity.

In the **COMMUNITY ENHANCEMENT PROPOSAL** section of the form, show the total amount of the request and a breakdown of the component activities. Because any allocation may be less than the amount requested, you should be careful to prioritize your proposed expenditures by order of importance, with number 1 having the highest priority.

### **PERFORMANCE INDICATORS FORM (Page 5)**

This form will provide data regarding your organization's success in achieving its mission. The measures should be linked to the service you propose to provide if funding is approved. Measures of both efficiency and effectiveness are encouraged as well as information on the number of people served. Some examples follow:

If you propose to provide a significant public event such as a parade, festival, or contest, you might measure the number of participants, sponsors, and/or spectators.

If your proposal is for funding to attract more out-of-County visitors, you might report the number of articles written or ads placed outside the County.

If you propose to provide services to tourists, you might measure brochures distributed, telephone, and walk-in inquiries, trade shows attended, or advertising dollars spent.

### **RESOLUTION OF THE BOARD OF DIRECTORS (Page 6)**

You must submit a resolution from the Board of Directors authorizing the filing of this funding request. If your Board of Directors does not meet until after March 1, 2005, please submit a blank copy of the Resolution with your application and mail in the completed Resolution after adoption.

### **IN SUMMARY**

Your completed application packet should include the original plus two copies of the following:

1. The six page application, including a Resolution from the Board of Directors approving the submittal of the application.
2. Any additional pages that may be needed to answer questions 5-9.
3. A copy of pages 1-6 of your IRS form 990 (pages 1 & 2 of 990EZ) required for receipts of \$25,000 and over or a copy of the State of California form showing your Tax Exempt/Non-profit Status.

Please do not include additional documentation, lengthy descriptions, or binders/folders with the application. These items can be provided to the Board at the Public Hearings, which are scheduled to occur in June of 2005.

Mail your completed packet (postmarked no later than midnight **March 1, 2005**) or hand deliver your application to the location listed below by **5:00 p. m.**

**Thomas Pastuszka**  
**Clerk of the Board of Supervisors**  
**1600 Pacific Highway, Room 402**  
**San Diego, CA 92101**

- **Further questions:** Contact Michelle Mitchell of the Auditor and Controller's Office of Financial Planning at (619) 531-4846.

One Application Per  
Organization

**COUNTY OF SAN DIEGO  
APPLICATION  
FOR**

**FISCAL YEAR 2005/06 COMMUNITY ENHANCEMENT FUNDING  
(Please type or print clearly)**

Grant agreement Period: July 1, 2005 through June 30, 2006

**DUE DATE: POSTMARKED BY MARCH 1, 2005**

**Taxpayer ID number:**

**Organization Name:**

(Must match name filed under Taxpayer ID number)

**Street Address:** ☐ New

**Mailing Address:** ☐ Same as above  
☐ New

**E-mail Address:**

**Popular name or d.b.a.:**

**Telephone Number:** (    )    -

**Fax Number:** (    )    -

**District** (by street address):  
1 2 3 4 or 5 (Enter only one)

**District(s) Served:** ☐ ☐ ☐ ☐ ☐  
1 2 3 4 5

**Primary Signatory & Title:**

**Amount requested:** \$ \_\_\_\_\_

Note: The amount requested **should not exceed** 50% of your organization's current FY Budget or 100% of the City funding (see Board Policy B-58, paragraph 10 and 11).

**Activity(ies) to be funded:**

Which **ONE** of the following best describes the activity in your proposal:

- ☐ Visitor Bureau/Chamber of Commerce  
☐ Economic Development  
☐ Museum/Park  
☐ Cultural/Educational

- ☐ Event \_\_\_\_\_  
Event date(s) \_\_\_\_\_  
☐ Other (describe) \_\_\_\_\_

**Submit application packet to:**

**Thomas Pastuszka  
Clerk of the Board of Supervisors  
1600 Pacific Highway, Room 402  
San Diego CA 92101**

**APPLICATION  
FOR  
FISCAL YEAR 2005/06 COMMUNITY ENHANCEMENT FUNDING**

**ORGANIZATION NAME:**

**QUESTIONS 1 - 4 WILL DETERMINE YOUR ELIGIBILITY**

1. What is the legal structure of your organization?
- ☐ Incorporated                      ☐ Non-profit                      ☐ Government Agency
- ☐ Sole Proprietorship                      ☐ Other (describe) \_\_\_\_\_
2. Do you hold tax-exempt, non-profit status?                      ☐ YES                      ☐ NO
- (If you answered "Yes" attach IRS 990 or State tax-exempt status form)
3. Is your organization functioning within the County of San Diego?                      ☐ YES                      ☐ NO
4. Is your organization staffed a minimum of 4 hours a day, 5 days a week?                      ☐ YES                      ☐ NO
- If you answered "NO" to questions 2, 3, or 4 please explain:

**QUESTIONS 5 - 9 WILL BE USED TO EVALUATE YOUR PROPOSAL**

5. Which of the following three areas would be served by your proposal?
- ☐ Unincorporated Area                      ☐ The Region (a part of the County                      ☐ A City  
of San Diego County                      that may encompass one or  
more cities)
- Identify Region or City: \_\_\_\_\_
6. What, specifically, will your project(s) provide to the people of San Diego County if funding is approved? The essence of the proposal should be condensed to 4 lines: (75 words or less)
7. Describe how your proposal(s) will promote tourism or economic development: (75 words or less)

**APPLICATION  
FOR  
FISCAL YEAR 2005/06 COMMUNITY ENHANCEMENT FUNDING**

**ORGANIZATION NAME:**

8. Why do you need the County's support for your proposal? (75 words or less)

9. What steps is your organization taking to increase funding from other sources? (75 words or less)

10. Name the elected body, administrator, or staff person who will be responsible for the expenditure of any funds allocated to your organization through the Community Enhancement Program.

11. Provide signatures, names and titles of **ALL** individuals who will be authorized to sign a grant agreement with the County of San Diego for Community Enhancement funds for the 2005-2006 Fiscal Year.

Primary Signature: \_\_\_\_\_

Name/Title: \_\_\_\_\_

(Please Print Clearly)

Secondary Signature: \_\_\_\_\_

Name/Title: \_\_\_\_\_

(Please Print Clearly)

Secondary Signature: \_\_\_\_\_

Name/Title: \_\_\_\_\_

(Please Print Clearly)

**SUMMARY OF FINANCIAL INFORMATION  
FOR  
FISCAL YEAR 2005/06 COMMUNITY ENHANCEMENT FUNDING**

**ORGANIZATION NAME:**

<b><u>FINANCIAL STATEMENT</u></b>	<b>PRIOR YEAR ACTUALS</b>	<b>CURRENT YEAR</b>	<b>PROJECTED</b>
	<b>JULY 1, 2003 Through JUNE 30, 2004</b>	<b>JULY 1, 2004 Through JUNE 30, 2005</b>	<b>JULY 1, 2005 Through JUNE 30, 2006</b>
Type in Your "Fiscal Year" if different.			
<b>COMMUNITY ENHANCEMENT GRANT REVENUES</b>	\$	\$	\$
<b>CITY FUNDING</b> ((18) Requested funding not to exceed this amount)			
<b>OTHER REVENUES</b>			
<b>TOTAL REVENUES</b> (Over \$25,000 attach IRS form 990)			
<b>TOTAL EXPENDITURES</b> ((19) Budget)			
<b>NET INCOME (LOSS)</b>	\$	\$	\$
<b><u>BALANCE SHEET</u></b>	<b>As of JUNE 30, 2004</b>	<b>As of JUNE 30, 2005</b>	<b>As of JUNE 30, 2006</b>
Type in Your "End of Fiscal Year" if different.			
<b>CASH AND INVESTMENTS</b>	\$	\$	\$
<b>ALL OTHER ASSETS</b> +			
<b>LIABILITIES</b> -			
<b>EQUITY</b> =	\$	\$	\$
<b>COMMUNITY ENHANCEMENT PROPOSAL</b>			
<b>AMOUNT REQUESTED</b>			\$
<b>PROPOSED EXPENDITURES:</b> (Prioritize in case of partial funding)			
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$

**PERFORMANCE INDICATORS  
FOR  
FISCAL YEAR 2005/06 COMMUNITY ENHANCEMENT FUNDING**

**ORGANIZATION NAME:**

**MISSION:**

<b>MEASURES</b>	<b>ACTUALS FY 2003-2004</b>	<b>ESTIMATED ACTUALS FY 2004-2005</b>	<b>PROJECTED FY 2005-2006</b>

**RESOLUTION OF THE BOARD OF DIRECTORS OF**

\_\_\_\_\_  
(Organization Name)

WHEREAS, the \_\_\_\_\_  
(Organization name)  
is a legally constituted nonprofit corporation or public/governmental entity, under the laws of the State of California, and is in complete control of its affairs through its own officers and members,

NOW THEREFORE, BE IT RESOLVED, that the Board of Directors of the

\_\_\_\_\_ hereby approves the filing of  
(Organization name)  
an application for the County of San Diego Community Enhancement Program funding for the County's 2005-2006 Fiscal Year.

Adopted on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Secretary, Board of Directors